## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000026540

Entity Name: MCRAE HUNT CLUB, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:			Now Princi	New Principal Place of Business:		
200 NW PH	IOSPHATE BL 7, FL 33860		New Fillici	ipai Flace di Busilless.		
Current Mailing Address:			New Mailin	New Mailing Address:		
PO BOX 49 MULBERRY	7 Y, FL 33860					
FEI Number:	61-1483852	FEI Number Applied For ( )	I Number Not Appli	icable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
200 NW PH MULBERRY	WOGAN S III IOSPHATE BL Y, FL 33860	US				
in the State of Florida.						
SIGNATUR	E: RUSTY FE	EASTER		04/30/2009		
	Electroni	c Signature of Registered Agent		Date		
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS						
Title: Name: Address: City-St-Zip:	D () FEASTER, RUST 5030 REECE RO PLANT CITY, FL	DAD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () CARROLL, ROG 8602 DEE CIR RIVERVIEW, FL		Title: Name: Address: City-St-Zip:	( ) Change( ) Addition		
Title: Name: Address: City-St-Zip:	D () BADCOCK, WOO P.O. BOX 497 MULBERRY, FL		Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition LAWSON, BILLY 9382 EDISON RD LITHIA, FL 33457		
Title: Name: Address: City-St-Zip:	D () WILKERSON, R 1325 SPRING C BARTOW, FL 33	Т	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition LAWSON, TIM 5302 FULWOOD DR PLANT CITY, FL 33565		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition BERGERMAN, MARC 2377 SE LONGHORN AVE PORT ST LUCIE, FL 34952		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	D ( ) Change (X) Addition WOLF, BOB 1297 40TH CT SW VERO BEACH, FL 32968		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUSTY FEASTER PRES 04/30/2009